



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Luke W. CLAUSON
Serial No. : 10/750,997
Filed : December 31, 2003
Title : METHODS AND DEVICES FOR ADJUSTING THE SHAPE OF A ROTARY
BIT

Art Unit : 3722
Examiner : Ali F. Abdelwahed

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Responsive to the action mailed June 15, 2006, applicant elects the invention of Group I drawn to the embodiment of Figs. 1A-E, 4 and 6. All claims (1-60) are readable on the elected invention. The election is made without traverse.

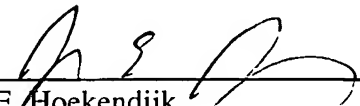
Applicant also acknowledges the request to make appropriate corrections to the claims to take into account the duplicate claim 35 which first occurrence thereof has been cancelled. Applicant submits that cancellation of the duplicate claim 35 will leave the claims in an acceptable form. Application respectfully requests clarification of this request.

Please apply any appropriate charges or credits to Deposit Account No. 50-1247.

Respectfully submitted,

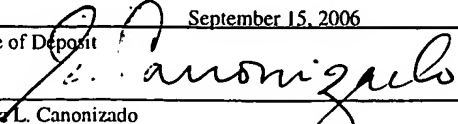
Date: September 15, 2006

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Reg. No. 37,149

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Date of Deposit September 15, 2006
Erica L. Canonizado

PTO/SB/21 (09-04) *DM***TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number

10/750,997

Filing Date

December 31, 2003

First Named Inventor

Luke W. CLAUSON

Art Unit

3722

Examiner Name

Ali F. Abdelwahed

Attorney Docket Number

017-002

ENCLOSURES (Check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Confirmation postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 50-1247. | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signature

Printed name

Jens E. Hoekendijk

Date

September 15, 2006

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37,149

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Typed or printed name

Erica L. Canonizado

Date

September 15, 2006